

Work Order ID 103716***103716***

Page 1

July-22-13 2:39:12 PM

Item ID: MS20822-3D

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: ELBOW

Stop

NS2

Start Date: 6/25/13 Start Qty: 2.00

2

Cust Item ID:

Required Date: 6/26/13 Req'd Qty: 2.00

2

Customer: CU-DAR001

Reference: RMA RA111567 - *Rgj DORL*

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
100		0.00							
100 QC	Memo INSPECT RA111567 2 X MS20822-3D M122807	0.00	5	3166/24					
110 *110* Packaging	Identify as per dwg & Stock Location: <i>St 313</i>	0.00							<i>4/3/24 (2)</i>
Packaging	Memo RETURN TO STK USING NEW B/N	0.00							
120 *120* QC	QC21- Final Inspection - Work Order Release	0.00							<i>13/7/29 (J)</i>
Quality Control	Memo	0.00							<i>WF</i>

13.7.24

Picklist Print

July-22-13 2:39:10 PM

Page 1

Work Order ID: 103716

Parent Item: MS20822-3D

Parent Item Name: ELBOW

Start Date: 6/25/13

Required Date: 6/26/13

Start Qty: 2.00

Required Qty: 2.00

Comments:

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MS20822-3D		Purchased	No				Each	13.0000		2			
ELBOW													

Location	Loc Qty	Loc Code
ST505	13	
125445	13	

RETURN AUTHORIZATION

100 Street
W Ontario K6A 1K7

Date: 21-Jun-13

DART RA Number: RA111567 - PART 1

Customer Name: Panterra Heli Support Ltd.

DHS RA Number:

Customer Code: PANT01

DHS PO #: PO5648

Telephone No: 905-563-1413

DART Invoice #: INV111718

E-mail Address: mike@panterra.ca

Customer Ref: 13-519201

Contact Name: Mike Tylee

PAR/CAR/NCR/SQ: N/A

Issued by: Lisa McMachen

Description	Batch Numbr
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1 D4002-041

Quantity	Part Number	Description	Batch Number
1	D4002-041 1033114	DRAIN HOSE ASS'Y - FRONT	95634
1	D4002-043 1033115	DRAIN HOSE ASS'Y - REAR	951035
2	MS20822-3D 1033116	UNION	122407
1	AN816-6D 1033117	STRAIGHT FITTING	121970
1	MS20822-8D 1033118	90 DEGREE FITTING	120693
2	D4009-041 1033124	BONDING BRAID	1985163

son for Return: PARTS ARE IN RECEIVING. MANUAL CREDIT

DED. PLEASE SEE PART 2 OF THIS RA. ALSO REFER TO RA111536

Credit Instructions:

Full credit

None

urn Instructions: Commerical Invoice Yes Documentation (STC/ARC/ICA) Yes Packing Slip Yes **Include on Commerical Invoice:**
Part Number/Description / Value in USD
Parts are aircraft parts / return to Manufacturer

Shipping Instructions: Prepaid _____ Collect _____ Courier _____
Account # _____

RECEIVING RETURN AUTHORIZATION

iver:	Condition of Packaging:	Paperwork:	P/L	Photograph Required
13/6/20	Freight Company: FEDex Air	RA	NONE	Yes No
Quantity	Part Number	QC Verification	CHG #	W/O#
	0350-799-141			W/O
	0350-799-141			as above
				next page

Inspector <u>DAS</u>	Photograph Attached <input checked="" type="radio"/> Yes <input type="radio"/> No	Condition:					
		Sealed	Complete	Short H/W	Short Kit	No P/W	Damaged

Comments: * see attached RA Form from DC.	Special Return/Rework Instructions: PARTS ARE IN RECEIVING

Issue Credit: Yes No CNINV112463 Invoice Amount: MANUAL

GM Approval: _____ Date: _____ Freight: *and Rail 5207*

Quality Assurance: _____ Close Date: _____

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only

<p>Work Order: _____</p> <p>Part No. _____</p> <p>NCR No. _____</p>	DISPOSITION <input type="checkbox"/> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved	AGAINST DEPARTMENT/PROCESS <input type="checkbox"/> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab	<input type="checkbox"/> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite	<input type="checkbox"/> Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier	<input type="checkbox"/> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function					<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence					<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

een Street
ury, Ontario K6A 1K7

REVIEW OF THE YEAR

2

Date: 21-Jun-13

DART RA Number: RA111567 - PART 2

Customer Name:	Panterra Heli Support Ltd.
Customer Code:	PANT01
Telephone No:	905-563-1413
E-mail Address:	mike@panterra.ca
Contact Name:	Mike Tylee
Issued by:	Lisa McMachen

DHS RA Number: _____
DHS PO #: PO5648
DART Invoice #: INV111718
Customer Ref: 13-519201
PAR/CAR/NCR/SQ: N/A

Quantity	Part Number	Description	Batch Number
1	D4008-041 103760	AUXILIARY TANK FILLER SPLASH GUARD	97595
3	TBA28B 103761	CABLE TIE FASTENER	95863
1	TY25MX 103770	TIE WRAP	1151095

Reason for Return: PARTS ARE IN RECEIVING, MANUAL CREDIT
NEEDED. PLEASE SEE PART 1 OF THIS RA ALSO REFER TO RA111536

Credit Instructions:

Full credit

None

Return Instructions:	Commercial Invoice <input type="checkbox"/>	Include on Commercial Invoice: <i>Part Number/Description / Value in USD</i>
	Documentation (STC/ARC/ICA) <input type="checkbox"/>	
	Packing Slip <input checked="" type="checkbox"/>	Parts are aircraft parts / return to Manufacturer

Shipping Instructions: Prepaid _____ Collect _____ Courier _____
Account # _____

RECEIVING RETURN AUTHORIZATION

QC Inspector:	Photograph Attached		Condition:					
Date:	Yes	No	Sealed	Complete	Short H/W	Short Kit	No P/W	Damaged
QC Comments:	Special Return/Rework Instructions: _____ PARTS ARE IN RECEIVING							

Issue Credit:	Yes	No	Invoice Amount:	MANUAL
			Restocking Fee:	
GM Approval:	Date:		Freight:	
			Net Credit:	
Quality Assurance:	Close Date:			

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only

Work Order: _____	DISPOSITION			AGAINST DEPARTMENT/PROCESS				
Part No. _____	Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
NCR No. _____	Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
	Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General				
Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Folio/Program <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>	
Centre Not Concentric <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Grain <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Set-up <input type="checkbox"/>	
Cracks <input type="checkbox"/>	Broken/Damage/Defect <input type="checkbox"/>	Hardware <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>	
Crimp/Kink/Ripple/Wave <input type="checkbox"/>	Burrs <input type="checkbox"/>	Inspection Incomplete/Unqualified <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Weld <input type="checkbox"/>	
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Moved <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>	
Crushing <input type="checkbox"/>	Countersink <input type="checkbox"/>	Misaligned/off center <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>		
Heat Treat <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>		
Inspection Strip in Tube <input type="checkbox"/>	Drawing <input type="checkbox"/>	Misread <input type="checkbox"/>		Other <input type="checkbox"/>	
Marks/Chatter <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Off-set <input type="checkbox"/>			
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>			
Wave/Twist in Tube <input type="checkbox"/>	Fit/Function <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>			